प्राप्त किया तथा प्रशिक्षण की अवधि और प्रशिक्षकों की सख्या कितनी थी;

(ग) प्रशिक्षण शिविरों में खिलाड़ियों को क्या-क्या सुविधायें उपलब्ध करवाई गई और उन्हें कितनी अवधि के लिये भत्ते के रूप में कितनी धनराशि प्रदान की गई थी; और

(घ) क्या भविष्य में इस प्रकार के कार्यक्रमो को जारी रखने का विचार है अथवा कोई नई योजना तैयार की जा रह है त कि आने वाले एशियाई खेलो और ओलम्पिक खेलों में और अधिक पदक जीते जा सके, यदि हां, तो उसका ब्यौरा क्या है?

मानव संसाधन विकास मंत्रालय में युवा कार्य और खेल तथा महिला और बाल विकास विभागों में राज्य मंत्री (श्रीमती मारग्रेट अल्वा) : (क) खेलकूद को बढ़ावा देने हेतु केन्द्रीय योजनाओं के लिए बजट आबंटन खेल विषय तार नहीं किय जाते । छठी पंचवर्षीय योजना अवधि (1980-81 से 1984-85) के दौरान राष्ट्रीय खेल संघों की वित्तीय सहायता के लिए 392.50 लाख रुपये के बजट आबंटन के स्थान पर वास्तविक खर्च की कुल राशि 380.72 लाख रुपये थी, जिस में विभिन्न खेल विषय शामिल हैं ।

(ख) और (ग) अपेक्षित सूचना एकत्र की जा रही है और यथा समय सभा पटल पर रख दी जायेगी ।

(घ) प्रतियोगी खेलों के विकास के लिए छठी आयोजना केन्द्रीय योजना उपयुक्त संशोधनों और बढ़े हुए वित्तीय आबंटन के साथ सांतवी योजना अवधि के दौरान चल रही है । इसके अतिरिक्त सातवीं पंचवर्षीय योजना के लिए कुछ नई योजनाएं भी कार्यान्वयन के लिए शुरू की गई हैं । इनमें अन्य बातों के साथ-साथ खिलाड़ियों को प्रोत्साहन देने की योजना, खेल छात्रावासों की स्थापना; खिलाड़ियों को आर्थिक सहायता से खल उपस्करों की आपूर्ति और स्कूलों को अपनाने सहित खेल प्रतिभा का पता लगाना और पोषण करना शामिल है ।

Consignment missing at Indira Gandhi International Airport

1453. SHRI KRISHNA KUMAR BIRLA: Will the Minister of CIVIL AVIATION be pleased to state:

(a) whether it is a fact that a consignment weighing more than four tonnes arrived from Singapore by KLM flight recently disappeared under mysterious circumstances from the Indira Gandhi International Airport;

(b) if so, what is the result of the inquiry, if any, conducted by Government into the missing consignment and what action has been taken by Government against the officials found guilty of laxity in handling the consignment or of corruption; and

(c) what is the amount of compensation paid or required to be paid by Government to the consignee for the loss of the consignment?

THE MINISTER OF STATE IN THE MINISTRY OF CIVIL AVIATION (SHRI JAGDISH TYTLER): (a) Yes, Sir.

(b) The matter is under investigation by the Police Authorities.

(c) No claims have been received so far for payment of compensation in respect of the said consignments.

Equipment for the treatment of Bhopal gas victims

1454. SHRI KRISHNA KUMAR BIRLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question No. 884 given in the Rajya Sabha on the 30th July, 1986 regarding the non-utilisation of the Gama Camera donated by the non resident Indian in U.S. for the treatment of MIC gas victims by the Hamidia Hospital Bhopal and state:

(a) whether Government are aware that the State Gas Relief Commissioner cancelled the orders placed for the purchase

of certain ancillary safety devices for handing the camera and directed the hospital authorities not to take any action for the installation of the camera and directed the hospital authorities not take any action for the installation of the camera and its use; and

(b) if so, what is the reaction of Government in the matter?

THE MINISTER OF STATE IN THE DEPARTMENT OF HEALTH IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) The information is being collected from the Government of Madhya Pradesh and will be laid on the Table of the Sabha.

Medical services available in rural areas

1455. SHRI KRISHNA KUMAR BIRLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the existing gap between the medical services available in the urban and rural areas in the country stating the doctor-patient ratio and how does it compare with the medical services made available during the year 1984 and 1985 in these areas;

(b) what is the percentage of hospital beds available in the rural areas out of the total number of hospital beds available in the country, and, with the increase in population, what is the percentage of rospital beds added in the rural areas as compared to the urban areas during the Sixth Five Yead Plan period; and

(c) what is the existing shortage of doctors in the Primary Health Centres in the rural areas stating the reasons therefor and the steps contemplated by Government to meet the shortage?

THE MINISTER OF STATE IN THE DEPARTMENT OF HEALTH IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) As per 1981 census population the doctor population ratio is 1:2305. Separate doctor population ratio for rural and urban areas is not maintained.

The statements indicating the number of hospitals and beds available during 1984 and 1985 in rural and urban areas of the country are placed at Annexures (See Appendix CXL, Annexure No. 61)

(b) The percentage of hospital beds available in rural areas out of the total number of hospital beds in the country at present is 12.6 per cent.

During the 6th Plan period the number of beds added in rural and urban areas are as under:—

	As on 1-1-81	*As on* 1-1-86	% *Increase*
Rural	62389	67300	7·9
Urban	404288	468435	15 9

(c) Out of 22993 sanctioned posts of doctors at Primary Health Centres only 2512 posts (10.1 per cent) are vacant which is not high as certain posts always remain vacant at a particular time due to transfers, postings, promotions, retirement etc. However, to attract doctors to work in rural areas the 8th Finance Cimmission on the suggestion of Ministry of Health and Family Welfare has provided special funds to the States for providing the following incentives to doctors serving in rural areas:-

(i) A rural allowance equal to 25 per cent of the basic pay subject to a maximum of Rs. 250/- per month for the doctors working in the Primary Health Centres; and

(ii) House rent allowance at the rate of Rs. 150/- per month where the doctors are not provided residential accommodation.

In addition, the Finance Commission has made Special provision of Rs. 53.52 crores for construction of residential quarters for the doctors. The hilly areas have been provided 30 per cent 'Mark up' in the cost of construction.